AHCCCS NPI Key Updates
December 2007

- As previously shared, the October 2006 Encounter cycle included the addition of an *optional* NPI field and related PMMIS system logic. From this point **until submissions on and after the required Contingency compliance date for 1/1/2008 submissions**, NPI's can be optionally submitted on encounters. <u>**For submissions on or after the compliance date of 1/1/2008 NPI's will be required for all non-Atypical providers.**</u>

- As previously shared, CMS elected to allow for an NPI Enforcement delay not to exceed May 23, 2008, to allow for ongoing testing and outreach efforts and to ensure no disruption in payment. AHCCCS also elected to exercise this option. Specific NPI Enforcement contingency information is available on the AHCCCS website.

- A current listing of Provider Type to NPI requirements is available on the AHCCCS Website for your reference.

- We will likely schedule brief updates either face to face or via phone with each Health Plan/Program Contractor in the next 30 to 6o days to confirm Contingency status and to discuss any issues/challenges.

- As requested in a NPI Consortium meeting last fall, AHCCCS prepared an – AHCCCS NPI Fact Sheet. This document was distributed in the January Consortium meeting in its final form. A subsequent request resulted in the development of a single page version focused on provider submission of NPI information. Both of these documents are posted to the AHCCCS website and may be used in whole or part by any Health Plan or Program Contractor. Please let us know if you have any questions, comments, suggestions, etc for future updates.

- AHCCCS will be working on an NPI Helpful Hints document specific to providers reporting their NPI's on applicable transactions and forms, this information once developed will be shared with all contractors and posted to the AHCCCS NPI Website.

- Reminder – AHCCCS will now accept NPI information directly from Health Plans/Program Contractors either via the Health Plan Provider Affiliation process or the Health Plan NPI information reporting form, please exercise these options in conjunction with the Top 500 Encounter provider's reports to update PMMIS provider information.

- Beginning March 1, 2007 AHCCCS requires that all new registrations of "covered" providers include the provider's assigned NPI, prior to completion of the registration process.

- Beginning February 1, 2007 AHCCCS began the production of the FTP provider file on a weekly basis. This is intended to provide Health Plans and Program Contractors with the most current NPI information on file for all AHCCCS providers. Weekly production of this file will continue through at least August of 2008.

- AHCCCS has continued monthly production and distributed of reports to all Health Plans/Program Contractors of your top 500 submitters based upon encounter data submissions for the previous 6 months. This information will continue to be distributed bi-monthly during the Contingency period, to allow you to track current status of NPI information related to your top providers and to provide you with an additional tool to help facilitate targeted outreach.

- Health Plan/Program Contractor NPI Contingency Plan status updates will be due the 15th of each month or the first working day after the 15th of each month, and need to be submitted timely. Reminder - We also need to know if the key NPI contact persons within your organizations change, so that we ensure that we are communicating to the appropriate parties.

- We will continue to work with each health plan individually on testing efforts as needed.

- AHCCCS received final confirmation as to the content and data availability from the NPI Enumerator; this information was distributed as a component of the HIPAA updates. AHCCCS has chosen to download available information as a component of our Data Warehouse and has begun to successfully use this information as a validation tool.

- AHCCCS is continuing to address identified issues/challenges related to NPI (current summary of tracked issues/challenges attached for your reference).